

ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
PFC DETERMINATION			
OLP.E. CLASSIFIER	PN	32	4/12
FORMALITY REVIEW			
RESPONSE FORMALITY REVIEW	MB	SC.906	05/10/01

INDEX OF CLAIMS

✓ \_\_\_\_\_ Rejected      N \_\_\_\_\_ Non-elected  
 o \_\_\_\_\_ Allowed      I \_\_\_\_\_ Interference  
 - (Through numbers) Canceled      A \_\_\_\_\_ Appeal  
 + \_\_\_\_\_ Restricted      O \_\_\_\_\_ Objected

Claim	Date	Claim	Date	Claim	Date
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If more than 150 claims or 10 actions  
 staple additional sheet here

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